

5-28-06 Depressed in pain everywhere - - -

6-1-06 Pain in (R) Abdomen area; shooting pain in Liver area (R) Side - - Depressed severely... feeling hopeless, helpless, useless, frustrated - - - Having problems walking on (R) Leg; Pain in (R) Knee, Hip, and Lower back - - - Pain shooting through (R) & (L) shoulders - - - Celebrix not helping - - -

6-2-06 Pain in (R) Knee, Hip, Lower back; I'm having mobility problems. unable to walk properly; Pain in Left/Right shoulders - mobility Limited severely - - Pain in (R) Liver/Abdomen Area; shooting Pain on right side - - - Depressed - - -

6-3-06 Depressed and hurt everywhere!

6-4-06 Angry, Depressed, Frustrated and Hurt everywhere; Also lumpy masses still swelling.

6-5-06 Depressed - Hurt everywhere, Blood in Stools, Dark and thick Blood and Red Bright

MEDICAL NOTESDATE:

10-23-07 - I have been in pain for week, in my shoulders, my left hip/lower back, Left Big toe pain, and Right Knee pain - motrin does nothing to relieve me of pain. I've requested relief to no avail. - I Turned in medical form.

10-24-07 - shoulders are in pain, I took motrin to no avail - ~~Left~~ Left hip, Big Toe, in pain and Right knee in pain - 1 to 10 (7/8) hurts Bad problems moving, walking in pain. I gave C/O Dennison ⁽⁶⁰²⁾ appeal and he mailed it on 10/27/07 but no response yet -

10-25-07 my lower right Back, hip and leg are in pain, causing Limited mobility and my right knee hurts ALSO; my ability to walk without Sever pain is worsening; my right toe and hip pains me at every step; my shoulders are severely inflamed and causing me excruciating throbbing pain that also shoots down my Arms; mobility is limited and painful; I drop things due to fact that I'm unable to hold them when some Sever Pain shoots down to my hand (R).

B = Both
L = Left
R = Right

10-26-07 I am not able to sleep due to pain in my shoulders^(B), hip^(L) and knee^(R). I am frustrated and depressed more due to lack of medical treatment that is meaningful, my^(L) hip hurts just laying down, sitting, and walking and my shoulders hurt worse; I've taken 2400 mg of Ibuprofen to no avail. I'm still in pain and my ability to walk, move my arms, pick up things and just write is limited. Due to severe pain, toe hurts too. I try to stretch but it hurts too much and does no good. can't exercise either. no able to concentrate to write/type book and other legal work; Pain distracting need relief! my shoulder hurts just holding and reading my Bible!

10-26-07 at approximately 0945 hours DR. Livesay took me to the clinic to try and help me get immediate

10-27-07 - I'm still in severe pain and not relief in sight. I've take numerous motrin to no avail. Can't sleep!

10-28-07 I'm hurting bad, and it hurts to write even as I get sharp pain down my arms, and sitting hurts as I have pain in my left hip. I'm stressed out and frustrated with no relief being given.

10-29-07 I turned in another request for medical treatment today as nothing has been done for me yet, and I'm in severe pain daily, "7-8" on scale of 1-10; I went to clinic at approx. 1000 hours to request treatment again as Escolante told me to ^{on 10/26} come back on monday, but he again delayed/denied my access to treatment for Arthritis, hip, toe, knee pain; I wrote out and turned in another slip then also. I'm also suffering from throbbing Lumb on my back (L/R sides) @ kidney

1 ... I ... nothing done to find out. t

(0945)
(10-26-07)

pain I'm having in my back, hip, knee, shoulders, toe as its worsening my Depression and I'm unable to get legal work, writing, and other work done as I'm not able to focus on much else except pain problem.

✓ After DR. Livesay exited the clinic while I was still there talking to c/o ESCOLANTE asking for immediate medical treatment.

★ ESCOLANTE Denied me access to the nurse and Doctor at that time telling me to come back another time (i.e. Monday); I explained to him I'm in pain, was suppose to have followups on cortisone shots that I never got called for and I need treatment now; "Do I have to suffer in pain until Monday He said, YES or Tuesday - Turn in another medical Request; I gave I turned in two already. I need treatment, He denied prompt medical care and has delayed it at this point until Monday, so I am left to suffer in debilitating pain.

cont.
11-1-07

★

✓

hours and they made me wait for approximately 4 hours until 1730 hours to see the doctor. The Doctor was informed of my severe pain, past Doctor orders for cortisone shots 4x a year yet gave me no meaningful, adequate, and effective treatment to relieve my pain and suffering, merely more delays. He gave me aspirin medications that do nothing to stop/reduce/relieve my pain.

↑
↓

11-2-07 - I am frustrated as the doctor did nothing for me yesterday to relieve my pain. I am in pain 7/8 bad. The Doctor did as little as possible for me and seemed unconcerned about my pain for which he asked me nothing of only viewed my movement disability. Can't sleep due to pain —

11-3-07 I'm still in pain, nothing done for me. Depressed

11-4-07 I hurt Bad am frustrated that nothing is being done...

what they are, and treat me for them. I'm depressed/stressed out due to lack of treatment.

10-30-07 I'm still in pain, impaired ability to walk and move arms and still no relief or response to my appeal and medical requests for needed care!

10-31-07 my shoulders are hurting bad and my mobility is impaired; my (R) knee is in pain and my (L) hip ~~spasm~~^{spasms} bad and I'm impaired in my movement and walking. The lumps on my back near my kidney area also throb and inflame; more inflammation at various times. I'm depressed, Frustrated, Angry, and feeling helpless/hopless because no treatment has been given —

11-1-07 The medical Dept. has ^{Left} keep me suffering in pain with no treatment for shoulders, ^(B) hip, ^(R) knee for Three straight weeks. ^(A) No W - no D next issued - I'm still in Pain 7/8 and 9 At times! —

11-1-07 → I got DUCAT for medical after Law Library and I got there at approx. 1130.

11-8-07 my shoulders are in pain; - Difficulty just pushing water Button - Pain through (L) Arm. (L) hip and toe painful and (R) knee are giving me problems walking and moving and even sitting; cant properly/easily undress and shower without severe debilitating pain in shoulders/arms.

11-9-07 unable to sleep because of ^(R) shoulder in pain and (R) knee pain; now that I'm up, I'm having problems moving around as (L) hip and toe and (R) knee in pain. I took meds; but it has done nothing to relieve the pain.

11-10-07 shoulders painful cant wash Back in shower, and other problem/painful areas (ie. shoulders, hair,) standing on one leg to wash is painful.

11-11-07 cant sleep, shoulders in pain, (R) knee ~~pain~~ and in pain. (L) Toe is in excruciating pain; DR. Leard said it may Be gout ^(SP) and ordered Blood test for me; cant write long or pick up Book at any length of time due to pain shooting in arms from shoulders. —

11-5-07 I am not walking well today and I hurt all over!... (Note: I gave meds. 4 days to work but are useless), I'm in severe pain still!

11-6-07 I awoke in pain at 0300 hours and could not go back to sleep. I took as much meds. as I could to dull the pain but it seems useless, so I've decided to do work since I can't sleep with pain; pain still in ⁽³⁾ shoulders ⁽⁴⁾ hip & toe, (R) knee, ~~2 bumps~~ ^{Bumps} on kidney bothering me also.

11-7-07 Burning and aching pain in (R) Knee, (L) hip ~~are~~ painful still, and (B) shoulders are still in pain; I taken all the meds I can but they are useless... unable to sleep due to severe pain, unable to undress without severe pain; unable to walk without severe pain; unable to even write without pain in my ⁽⁴⁾ shoulder; my physical strength is diminished considerably because I'm unable to really exercise without too much pain stopping me! unable to pick up certain heavy objects books -, legal papers, boxes; too much pain! with pain management maybe I could exercise slow damage!

11-15-07

I'm in pain, Limping and having trouble carrying All my legal papers. It hurts! no relief yet and I went to Blood testing for gout in ^(L) toe that Psychiatrist ordered because I'm in so much pain; and complaining.

11-16-07

Shoulders Popping and tendons are in pain, ^(L) hip/toe Pain and (R) Knee pain is really bad today. It also hurts my ^(L) shoulder just when I write and move my arm; I took meds, but they are useless and don't seem to work on shoulder, hip/toe, Knee pain, I'm depressed because I can't seem to get medical (effective) Treatment!

11-17-07

I awoke in pain. my Shoulders are hurting bad, having problems brushing teeth my Shoulders hurt so much. The other pain in ^(R) knee, ^(L) hip/toe is not nearly as severe as my Shoulders are right now, Today! Yet, I still Limp and have problems walking and moving!

11-12-07 Can't Sleep due to throbbing pain in my shoulders, ^(R) Knee and Left hip/Toe hurt bad also No relief in sight.

11-13-07 (L) Hip hurting, shoulders throbbing, (R) knee burning/aching and can't sleep because of pain - too much - Depressed, feeling hopeless and helpless because no one will provide me with effective pain relief and treatment/diagnosis. I'm going to appeal as high up as possible, Hope I don't have any more relaxation!

11-14-07 I reported to Nurse Line due to chronic pain in shoulders, Knee, Toe; need for adjustable knee brace, change of pain meds, cortisone shots, and nose/sinus spray change because it burns nose, Requested to see Dr. Canlas today, nurse asked for me, but Canlas refused to see me and denied ^{delayed} access to medical treatment for at least two weeks, no pain treatment/management meds. I'm frustrated, helpless/hopeless, to do anything and Depressed Bad!!!
When I told nurse I was having chronic pain she smiled and said "nothing I can do."

11-23-07 I self medicated myself and feel a little better but still hurting although I'm better able to move today.

11-24-07 I'm having severe shoulder/hip pain today, and my mobility is impaired. I'm unable to go to yard due to pain and lack of mobility/pain. Severe! Depressed, Frustrated, Angry, and not able to be around others.

~~11-24-07~~ 11-24-07, Retaliation for exercise of right, in form of refusal to give psychiatric meds at H/S during Lockdown. Witness: Robert Hendrickson, F19729

11-25-07 (L) hip and shoulders hurt and I can't sleep, Depressed, frustrated, Angry, and The psych meds were not given to me last night, I asked again at 2:00 hours, of the court guard, where our meds were. He said "I don't know sir" but refused to call and get them delivered or someone who could bring them to us. Witness: Robert Hendrickson, F19729

11-18-07 I'm in severe shoulder pain today and hip pain, and toe and knee pain! I took meds but they do nothing. my shoulder hurts just sitting still or writing.

11-18-07 at approx. ~~2030~~ 2030 hours we informed Reyes in tower that we needed to be released from cell to get H/S medications, but in retaliation, he refused ~~to~~ ^{delayed} acce to psychiatric meds needed.

11-19-07 shoulder's and hip hurt bad today. I'm unable to sleep since 3 am. I've taken ~~meds~~ but they do nothing.

11-20-07 - NOT able to sleep due to pain in shoulders, and hip. no relief or medical attention in sight. Frustrated! Depressed! Angry! Hurting!

11-22-07 Did not Log yesterday's pain. I was very Depressed as I am today and I'm still in severe pain and having mobility problems! no medical attention! I took meds, use less though!

11-29-07 I've been so depressed, frustrated, feeling helpless and hopeless the past three days I've been unable to document my Pain Arthritis, Knee, toe, and hip, that ~~was~~ all been hurting bad; Today I'm hurting, but am able to move a little better with all the pain medication I'm on; The Doctor/Pharmacy was giving me my Salsalate Pain meds in yellow Tabs and in my cell; even though they don't work I still take them Three times a day to at least reduce my suffering, but now that have ~~made~~ the Salsalate a med I have to get three times daily at the pill line window, but I have not been able to get out of my cell to get it because the C/Os guards refuse to let me out of my cell at the middle of the day; However, I have been able to get it at the regular pill times. I in bed

11-25-07 Also for past week the lumps on my back at kidney area and, moving up, are irritating me by swelling and throbbing with pain, I don't believe they are fat nodules as I have a fat nodule on back of (L) arm which is there and does not bother me in any way. I need MRI or some type of computer imaging or biopsy done to find out exactly what lumps are. Blood tests have shown nothing which does not necessarily mean nothing is wrong or ails me. Ask Doc to do testing on nodules.

11-26-07 (L) hip in pain and shoulders, (R) knee and (L) toe; lock down has prevented me from getting to clinic. Pain has prevented me from sleep, exercise, walking and other mobility functions of every day normal life. The failure to provide my medication on 11-24-07 thru 11-25-07 caused me severe depression, inability to function around people, inability to do legal work, go to work, straight delaying court access and head rushes that kept me dizzy and unable to perform normally; mood swings, anger, agitation, depression, frustration, etc., etc, etc.

12-4-07 Hip is hurting and so are shoulder's. I have a doctors appointment today will try to deal with problems and pain, Also Lumps at Kidney area.

12-4-07 - Doctor does not have my medical File so they refused/delayed seeing me and providing me medical treatment for approximately one week for next scheduling. The medical Dept. has chosen to leave me in pain to suffer for another week, instead of diagnosing and treating me.

12-6-07 Shoulder's and (L) Toe hurting bad! can't walk properly or move fully with arms.

12-9-07 Shoulders, (L) Toe and (R) Knee are in chronic, severe pain today.... my (R) Shoulder is throbbing/aching and shooting pain down my arm that is excruciating and I am not able to sleep. It's 3 AM. my (L) Toe when I bent it hurt so bad I had to grab it to try and stop the pain and to keep it straight and

Pain and still have not been able to get treatment.

11-30-07 shoulders in pain. It hurts just to put on my shoes and tie them. Hip is in pain and toe. (R) knee is burning bad. Clinic staff retaliated by taking salsalate and putting it in hot med window. I made my meds at Night Line due to severe depression preventing me from getting them in morning because I ~~was~~ ^{am} unable to get myself to med line in morning. This denies me med access.


12-1-07 shoulders, hip, and toe hurting bad; knee is still burning pain; I've been taking med but they don't seem to do anything. I'm still in pain. Lumps bothering me.

12-2-07 (R) knee is hurting and (L) hip, both shoulders are in pain and (L) toe hurts bad.

12-3-07 my pain has not gone away even though I take my medication 3x daily. I'm hurting badly! Lumps swelling.

12/29/07 Conti: Painful (R) Knee (L) Toes impaired ability to walk. Pain keeps me up at night, Run down all day, and hurting. Just want something that works to relieve swelling of joints and muscles (Iv Predn. 50mg 10 mg Daily); The lumps on my back, kidney area are swollen and throbbing.

12-21-07 Shoulders hurting today and limited or impaired walking as (R) Knee hurts and (L) big Toe.

12-23-07  Severe Pain in (L) Toe, (R) knee, and (B) shoulders, mobility limited still no relief from doctors. Not rescheduled for appointment yet. Frustrated, Depressed!!

12-27-07 (R) Knee hurting bad and (L) Toe, Also shoulders are painful and weak and limited in mobility.

12-29-07 (R) Knee Painful "Burning" and shoulders hurt bad (L) Toe also...

without movement, so it does not hurt so bad! Limping when I walk.

12-12-07 my hip (L) and toe are hurting and my ^{shoulders} ~~shoulders~~ are in pain so I can't sleep.

12-13-07 shoulders are severely hurting today and movement is limited; unable to pick up heavy books & objects. Toe is throbbing...

✓
☆ At approximately 0830 I asked C/O Escalante why I have not been reeducated for my doctor's appointment yet and he brushed me off without explanation. I told him I'm in pain, but it didn't seem to matter.

12-17-07 I saw Physical therapist who tortured me by twisting my shoulder joints all around. It was very painful but I suppose therapeutic. I'm frustrated with Doctor Appointments; nothing seems to get done by them. I 602 appealing the Doctors, actions or rather inactions

12-20-07 shoulders hurt but I have stretched like Physical Therapist taught me to, and movement is better but painful. (R) Knee-

1-14-08 Lumps over kidneys are in severe ~~1-23-08~~
Pain and hurt and are inflamed!
Shoulder's, Knee, and Toes not bothering
me since I started taking prednazone
for Pain/inflammation.

1-23-08 Pain in Shoulder's, Knee, & Toes have
disapated ever since I started taking
prednazone in combination with
motrin, although it is not totally
gone. I can move more freely and
have started to do more stretching
and exercises. Yet I have run out
of Prednazone now. . . . Lumps on back
still swell and give me pain. Also have
problems with breathing in cell ventilation
and during strenuous activities - mucus
coming up out of my lungs - my
muscle fibers still swell and cause
pain in Shoulders and on side of
(R) arm.

1-24-08 Shoulders, (L) Toes, and Knee in pain
today. I stopped Prednazone a couple
days back and up until today I was
still in and could handle pain, as it was

12-30-07 (R) Knee, (L) Big Toe painful and shoulders have limited mobility... Still no Re-scheduled Doctor's Appointment from 12-4-07, Regardless of my requests and Appeal...

1-1-08 (R) Knee severe pain and shoulders and my mobility is impaired, can't move quickly or turn fast. unable to Exercise. Shoulders are hurting just writing so I'm stopping.

1-4-08 Shoulders are killing me the past few days and my (R) Knee hurts more so and I'm limping even more. I take my meds but they don't seem to help relieve the pain! (L) Toes are very painful but don't know if it's Arthritis or what because doctors have refused to treat/diagnose me fully, adequately, effectively, and meaningfully.

1-9-08 Shoulders hurt but not as bad as yesterday. (R) Knee painful and (L) toes painful. I'm impaired in my ability to sleep, walk, and move my arm, etc....

2-1-08

Shoulders are severely hurting again, especially (R) side and movement is impaired; also (R) foot and (L) knee are painful and matrih/methocarbomal do nothing to relieve pain and lumps are swelling and throbbing and (R) kidney area sore. Also Tinnitus is irritating me and unable to concentrate and sleep.

2-8-08

Shoulders, (R) knee, (L) Foot Toes in pain, and kidney lumps swelling and throbbing. Tinnitus is continuous... DR. Canlas claimed he could not treat me for Arthritis because I have hep. C and that he would not give me anything for pain. Also I ~~told~~^{went} to him with all my problems (ie shoulders Arthritis (R) knee pain, (L) Foot pain, burning nasal spray, Breathing problem, and kidney lumps; He said he would not do anything for all but 2-problems today and said I'd be reeducated for other problems - no Examination of lumps - no X-Ray of (L) Foot would not change burning nose spray...

1-27-08 The pain in my shoulders and Toes and Knee is worsening, now that the prednisone has stopped. The lumps still throb and swell, and the Tinnitus never stops! I've requested treatment for all of this and my psychologist Levesay brought me to clinic to help me request treatment for both pain and Tinnitus.

1-28-08 I'm in pain in shoulders, Toes, lumps and Knee, and Tinnitus still persists. I went to see Physical Therapist today and I asked about why I was not seen for the past two weeks and she said that I was scheduled to be seen twice a week but whomever does the docs has messed up and not educated me. Find out MSN contractor, who, how much, and when contracted for - (Medical Services Network)

1-30-08 Shoulders hurt, Foot hurts, but I had Physical therapy today for which I am able to move a little better now, Although pain persists... The Physical Therapist asked for X-rays of shoulders and got them done. Shocking - Doctors fail to properly treat and diagnose.

2-21-08 my shoulders, (R) Knee, (L) Toes have been hurting without relief since last log. I did not get saline spray and Albuterol inhaler at all; I've complained to nurse several times but it never came and she claimed it expired. order was never filled still having breathing problems.

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EXHIBIT COVER PAGE

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EXHIBIT

DESCRIPTION OF THIS EXHIBIT:

NUMBER OF PAGES TO THIS EXHIBIT: _____ PAGES.

JURISDICTION: (Check only one)

- ☐ CDCR Administrative Appeal
- ☐ California Victim Compensation
And Government Claims Board
- ☐ Municipal Court
- ☐ Superior Court
- ☐ Appellate Court
- ☐ State Supreme
- ☐ United States District Court
- ☐ United States Circuit Court
- ☐ United States Supreme Court

DEPARTMENT OF CORRECTIONS
RICHARD J. DONOVAN CORRECTIONAL FACILITY
480 Alta Road
San Diego, CA 92179



December 21, 2007

Daniel Lang
CDCR# C82516
F1-01-111L
Richard J. Donovan Correctional Facility

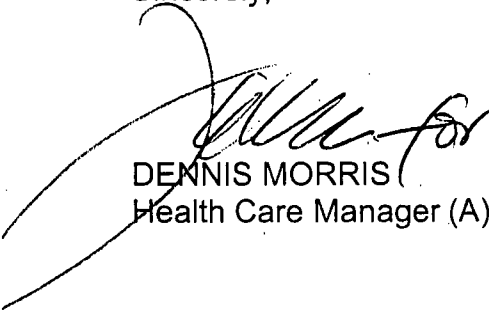
Mr. Lang:

This is in response to your Government Claim form dated November 8, 2007, stating that you have been denied medical treatment for your arthritic condition. Your health medical record has been reviewed by Dr. Choo, Chief Physician and Surgeon, and it has been determined that your claims have not been substantiated.

Mr. Lang you have been receiving appropriate care for your medical problems, including shoulder and knee pain, x-rays have been performed, physical therapy performed on several occasions, surgery completed on your right knee, shoulder injections done on several occasions, and pain medication prescribed. Mr. Lang you are enrolled in our Chronic Care Program, and will be receiving regular follow-ups for your medical problems.

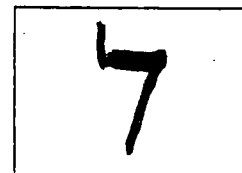
If you should have any further questions, please contact John Webster, Correctional Health Administrator II, via institutional mail.

Sincerely,


DENNIS MORRIS
Health Care Manager (A)

Handwritten initials and number: 6-1-06

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**CALIFORNIA
PRISON HEALTH CARE
RECEIVERSHIP CORP.**

Robert Sillen
Receiver

December 27, 2007

Daniel Lang, C-82516
Richard J. Donovan Correctional Facility
P.O. Box 799001
San Diego, CA 92179-9001

Dear Mr. Lang:

The California Prison Health Care Receivership has received your letter. We appreciate your correspondence. Our office carefully reviews each communication we receive regarding inmate patient health care. All information provided to us is considered in implementing systemic reform.

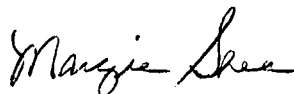
Due to the high volume of letters we receive, we are unable to immediately respond to all individual cases. You may wish to contact counsel for the inmate class in Plata v. Schwarzenegger, the Prison Law Office. For your records, the address to the Prison Law Office is:

Prison Law Office
General Delivery
San Quentin, CA 94549

The Receiver is committed to creating a system where custody and health care staff together guarantee that access to care and quality of medical services in California prisons meet constitutional standards. An integral part of meeting that goal is hearing from the patients about the treatment they are receiving.

We will achieve improvements in the quality of medical care. However, it is a large and complex problem for which there are no quick fixes, but I assure you that the work has already begun. Thank you for your interest in the remedial process.

Sincerely,



for Kristina Hector
Inmate Patient Relations Manager

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EXHIBIT COVER PAGE

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- ☐ United States Supreme Court



STATE OF CALIFORNIA
ARNOLD SCHWARZENEGGER, Governor

GOVERNMENT CLAIMS PROGRAM
400 R Street, 5th Floor ♦ Sacramento, California 95811
Mailing Address: P.O. Box 3035 ♦ Sacramento, California 95812
Toll Free Telephone Number 1-800-955-0045 ♦ Fax Number: (916) 491-6443
Internet: www.vcgcb.ca.gov

ROSARIO MARIN
Secretary
State and Consumer Services Agency
Chairperson

JOHN CHIANG
State Controller
Board Member

MICHAEL A. RAMOS
San Bernardino County District Attorney
Board Member

KAREN McGAGIN
Executive Officer

Daniel Lang c82516
P.O. Box 799001
San Diego, CA 92179

January 03, 2008

RE: Claim G571431 for Daniel Lang, c82516

Dear Daniel Lang,

The Victim Compensation and Government Claims Board (VCGCB) received your claim on November 16, 2007.

Your claim is being accepted only to the extent it asserts allegations that arise from facts or events that occurred during the six months prior to the date it was presented.

Based on its review of your claim, Board staff believes that the court system is the appropriate means for resolution of these claims, because the issues presented are complex and outside the scope of analysis and interpretation typically undertaken by the Board. The claim has been placed on the consent agenda. The VCGCB will act on your claim at the February 21, 2008 hearing. You do not need to appear at this hearing. The VCGCB's rejection of your claim will allow you to initiate litigation should you wish to pursue this matter further.

If you have questions about this matter, please mention letter reference 99 and claim number G571431 when you call or write your claim technician/analyst at (800) 955-0045.

Sincerely,

Government Claims Program
Victim Compensation and Government Claims Board

cc: B-23 Corrections and Rehabilitation, Attn: Donna Corbin

Ltr 99 Complex Issue Reject

Handwritten signature and initials, possibly "JLS" and "8".

STATE OF CALIFORNIA — DEPARTMENT OF CORRECTIONS AND REHABILITATION

ARNOLD SCHWARZENEGGER, GOVERNOR

DIVISION OF CORRECTIONAL HEALTH CARE SERVICES

P.O. Box 942883
Sacramento, CA 94283-0001



January 8, 2008

Mr. Daniel J. Lang C82516
R.J.D. Correctional Facility
P.O. Box 799001
San Diego, CA 92179

Dear Mr. Lang:

This is in response to your correspondence dated November 8, 2007, to the California Department of Corrections and Rehabilitation (CDCR), regarding the medical care and treatment you are receiving while incarcerated at the Richard J. Donovan Correctional Facility (RJD). Your correspondence was forwarded to Division of Correctional Health Care Services (DCHCS) for review. I have been asked to respond to your concerns.

In your correspondence you state you suffer from degenerative arthritis and the delay and/or denial of medical treatment at RJD has caused you physical and mental distress. You state have chronic pain in your toe, knee, hip and shoulders and have been denied cortisone shots as prescribed by a doctor. You further state you were denied an adjustable knee brace, egg crate mattress/headrest and medical shoes. You request a monetary reward and an investigation into this matter.

DCHCS contacted the RJD medical staff who reviewed your Unit Health Record (UHR) and medical appeals history. Records indicate you are currently enrolled in the Mental Health Services Delivery System at the Enhanced Outpatient Program level of care due to depressive disorder. Your UHR indicates you were tested and provided with the results of your arthritis panel and x-rays. DCHCS was informed you have been regularly evaluated by a clinician, administered pain medication including a cortisone shot in June 2007, and referred to physical therapy and the orthopedic clinic for knee and shoulder pain. Records indicate you did not report toe pain to the clinician during your appointment on November 1, 2007; however, a follow-up appointment with your primary care provider for pain management and tendonitis is pending. There was no indication in your UHR you have been denied health care services when you have requested medical treatment at your institution.

The inmate appeal process described in the California Code of Regulations, Title 15, is an integral part of the administrative remedies available for inmates to resolve issues concerning any departmental decision, action, condition or policy that they can demonstrate has had an adverse effect upon their welfare. If you are not satisfied with the

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Mr. Daniel J. Lang
Page 2

medical care you are receiving, you are encouraged to continue to address your issues through the inmate appeals process. The issues are reviewed and responded to carefully and thoroughly. It is the Department's desire to resolve these issues at the local level if at all possible. Records indicate you have filed two appeals to addressing the issues you raised in your correspondence. Your first appeal was granted at the first level and the second appeal is pending.

If you should require further medical assistance, please use the "sick call" process by completing a *Health Care Services Request Form*, CDC Form 7362, to request an appointment with a clinician to address your concerns.

I hope this information has been of assistance.

Sincerely,

Marjorie Shea

for Nancy Warren
Staff Services Manager I
Clinical Programs Risk Management Unit
Division of Correctional Health Care Services

cc: Regional Administrator – South
Regional Medical Director – South
Health Care Manager, RJD

EX 8



STATE OF CALIFORNIA
ARNOLD SCHWARZENEGGER, Governor

GOVERNMENT CLAIMS PROGRAM
400 R Street, 5th Floor ♦ Sacramento, California 95811
Mailing Address: P.O. Box 3035 ♦ Sacramento, California 95812
Toll Free Telephone Number 1-800-955-0045 ♦ Fax Number: (916) 491-6443
Internet: www.vcgcb.ca.gov

ROSARIO MARIN
Secretary
State and Consumer Services Agency
Chairperson

JOHN CHIANG
State Controller
Board Member

MICHAEL A. RAMOS
San Bernardino County District Attorney
Board Member

KAREN MCGAGIN
Executive Officer

Daniel Lang c82516
P.O. Box 799001
San Diego, CA 92179

February 29, 2008

RE: Claim G571431 for Daniel Lang, c82516

Dear Daniel Lang,

The Victim Compensation and Government Claims Board rejected your claim at its hearing on February 21, 2008.

If you have questions about this matter, please mention letter reference 123 and claim number G571431 when you call or write your claim technician or analyst at (800) 955-0045.

Sincerely,

Laura Alarcón, Program Manager
Government Claims Program
Victim Compensation and Government Claims Board

cc: B-23 Corrections and Rehabilitation, Attn: Donna Corbin

Warning

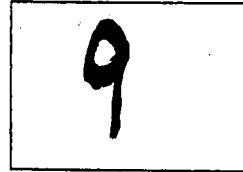
Subject to certain exceptions, you have only six months from the date this notice was personally delivered or deposited in the mail to file a court action on this claim. See Government Code Section 945.6. You may seek the advice of an attorney of your choice in connection with this matter. If you desire to consult an attorney, you should do so immediately.

It is not necessary or proper to include the Victims Compensation and Government Claims Board (Board) in your court action unless the Board was identified as a defendant in your original claim. Please consult Government Code section 955.4 regarding proper service of the summons.

Ltr 123 Claim Rejection

EX-8

EXHIBIT COVER PAGE



EXHIBIT

DESCRIPTION OF THIS EXHIBIT:

NUMBER OF PAGES TO THIS EXHIBIT: _____ PAGES.

JURISDICTION: (Check only one)

- ☐ CDCR Administrative Appeal
- ☐ California Victim Compensation
And Government Claims Board
- ☐ Municipal Court
- ☐ Superior Court
- ☐ Appellate Court
- ☐ State Supreme
- ☐ United States District Court
- ☐ United States Circuit Court
- ☐ United States Supreme Court

STATE OF CALIFORNIA
DEPARTMENT OF CORRECTIONS AND REHABILITATION
INMATE APPEALS BRANCH
P. O. BOX 942883
SACRAMENTO, CA 94283-0001

DIRECTOR'S LEVEL APPEAL DECISION

APR 26 2008

Date:

In re: Daniel Lang, C82516
Richard J. Donovan Correctional Facility
at Rock Mountain
P.O. Box 799006
San Diego, CA 92179-9005

IAB Case No.: 0721732

Local Log No.: RJD-07-02778

This matter was reviewed on behalf of the Director of the California Department of Corrections and Rehabilitation (CDCR) by Appeals Examiner C. Hall, Facility Captain. All submitted documentation and supporting arguments of the parties have been considered.

I APPELLANT'S ARGUMENT: It is the appellant's position he is not receiving meaningful, effective or adequate treatment or pain management for his degenerative arthritis. The appellant further contends he submitted a CDC Form 7362, Health Care Services Request on October 15, 2007; however, alleges he has not received the treatment recommended, including steroidal injections. The appellant alleges he has suffered from debilitating pain due to the lack of treatment and is requesting immediate pain management for his arthritis.

II SECOND LEVEL'S DECISION: It is the institution's position the appellant was interviewed by Dr. Martinez on January 9, 2008. Results of the interview revealed the appellant was evaluated by his primary care physician (PCP) on November 1, 2007. His treatment plan included Tylenol and Salsalate for pain; and, referral for physical therapy (PT) and an orthopedic consultation. The appellant's Unit Health Record was reviewed, which indicated he started PT on December 17, 2007, and is being treated weekly. On January 9, 2008, the appellant's PCP prescribed Prednisone and Robaxin, ordered laboratory studies and scheduled an appointment in one month.

III DIRECTOR'S LEVEL DECISION: Appeal is denied.

A. FINDINGS: The appellant contends he has degenerative arthritis and alleges he is not receiving adequate treatment and/or pain management. These allegations are refuted, as the appellant has been examined by his PCP, and was referred to PT and for an orthopedic consultation. In addition, the appellant has been prescribed pain medications deemed appropriate by his PCP. On April 3, 2008, the reviewer was informed by J. Rivera, Health Care Appeals Coordinator, the appellant was scheduled for an orthopedic consultation that day, April 3, 2008. After the completion of the specialty service, the appellant is encouraged to submit a CDC 7362 in order to address any recommendations made by the orthopedic specialist. However, the appellant is advised California Code of Regulations, Title 15, Section (CCR) 3354 (7) (c) states that health care personnel not employed by the Department are not authorized to prescribe treatment for an inmate. Such persons may offer opinions and recommendations for consideration by Departmental health care staff. In addition, the appellant is reminded the CCR 3354 establishes that only qualified medical personnel shall be permitted to diagnose illness and/or other conditions, and prescribe medical treatment for inmates. It is not appropriate to self-diagnose medical problems and expect a physician to implement the appellant's recommendation for a course of medical treatment. In this particular matter, the appellant's contention that he has not received adequate medical care is refuted by the medical records and professional health care staff familiar with the appellant's medical history. In addition, the Department shall only provide medical services for inmates which are based on medical necessity and supported by outcome data as effective medical care. In the absence of available outcome data for a specific case, treatment will be based on the judgment of the physician that the treatment is considered effective for the purpose intended and is supported by diagnostic information and consultations with appropriate specialists. After review, there is no compelling evidence that

EX-9

DANIEL LANG, C82516
CASE NO. 0721732
PAGE 2

warrants intervention at the Director's Level of Review, as the appellant is receiving the treatment deemed medically necessary, including examinations, medications and specialty services.

Arthritis is a general term that means inflammation in joints. Osteoarthritis, also called degenerative joint disease, is the most common type of arthritis. It is associated with a breakdown of cartilage in joints and can occur in almost any joint in the body. It most commonly occurs in the weight bearing joints of the hips, knees and spine. It can also affect the fingers, neck and large toe. It most commonly occurs in the weight bearing joints of the hips, knees and spine. It can also affect the fingers, neck and large toe. It rarely affects other joints unless prior injury or excessive stress is involved. Cartilage is a firm, rubbery material that covers the ends of bones in normal joints. Its main function is to reduce friction in the joints and serve as a "shock absorber." The shock-absorbing quality of normal cartilage comes from its ability to change shape when compressed (flattened or pressed together). Osteoarthritis causes the cartilage in a joint to become stiff and lose its elasticity, making it more susceptible to damage. Over time, the cartilage may wear away in some areas, greatly decreasing its ability to act as a shock absorber. As the cartilage deteriorates, tendons and ligaments stretch, causing pain. If the condition worsens, the bones could rub against each other. Medications may be prescribed to reduce pain caused by osteoarthritis. Pain-relieving medications include acetaminophen (for example, Tylenol) and anti-inflammatory drugs (often called NSAIDs), such as aspirin and ibuprofen. Some medications in the form of creams, rubs or sprays may be applied over the skin of affected areas to relieve pain. For some people with persistent pain despite these pills or creams, steroids can be injected directly into the joint for pain relief. These injections are typically limited since prolonged use can lead to bone and cartilage deterioration and weakness.

B. BASIS FOR THE DECISION:

CCR: 3350, 3350.1, 3350.2, 3354

C. ORDER: No changes or modifications are required by the Institution.

This decision exhausts the administrative remedy available to the appellant within CDCR.


N. GRANNIS, Chief
Inmate Appeals Branch

cc: Warden, RJD
Health Care Manager, RJD
Appeals Coordinator, RJD
Health Care Appeals Coordinator, RJD

**INMATE/PAROLEE
APPEAL FORM NOV 07 2007**

CDC 602 (12/87)

RICHARD J. DONOVAN CGRR. FAC.

Location: Institution/Parole Region

Log No.

Category

1. RJD1. 07-2778

2. _____

2. _____

You may appeal any policy, ~~appeals~~ decision which has a significant adverse affect upon you. With the exception of Serious CDC 115s, classification committee actions, and classification and staff representative decisions, you must first informally seek relief through discussion with the appropriate staff member, who will sign your form and state what action was taken. If you are not then satisfied, you may send your appeal with all the supporting documents and not more than one additional page of comments to the Appeals Coordinator within 15 days of the action taken. No reprisals will be taken for using the appeals procedure responsibly.

NAME	NUMBER	ASSIGNMENT	UNIT/ROOM NUMBER
LANG, D. J.	C82516	E.O.P.	F.1-1-111 L

A. Describe Problem: On 10-15-07, I sent a "Health care services request form" to the R.J.D. Facility 'One Clinic requesting immediate and/or prompt treatment for "Degenerative Arthritic Pain" and other pain I have been experiencing; The Doctors were suppose to do follow ups on my pain management, and the Cortisone injections that were suppose to be ginen to me four times a year; I have not been given any menaingful, effective, and adequate treatment, pain management, for my on-going disability of degenerative arthritis, or other pain management problems (i.e. My right Knee; And Left hip); I've suffered debilitating pain due to the lack of treatment and pain medication/management....
Treatment has been delayed/denied by staff....

If you need more space, attach one additional sheet.

B. Action Requested: Please provide me with immediate, prompt, pain management of my on-going arthritic problem, and the other pain problems instead of leaving me to suffer for weeks at a time with no relief in sight; Thank you for your time and consideration in this most important matter! - Copy made & Filed -

Inmate/Parolee Signature: Daniel J. Lang Date Submitted: 10-22-07

C. INFORMAL LEVEL (Date Received: OCT 25 2007)

Staff Response: YOU HAVE AN APPOINTMENT ON 11/01/07 WITH YOUR FACILITY PROVIDER DISCUSS MEDICATION OPTIONS AND PAIN MANAGEMENT AT YOUR APPOINTMENT.

Staff Signature: John Ruera HCAC Date Returned to Inmate: 10/29/07

D. FORMAL LEVEL

If you are dissatisfied, explain below, attach supporting documents (Completed CDC 115, Investigator's Report, Classification chrono, CDC 128, etc.) and submit to the Institution/Parole Region Appeals Coordinator for processing within 15 days of receipt of response.

I am dissatisfied because on 11-1-07, I went to see Doctor Canlas for the cronic pain from (B) shoulder Arthritis, (L) hip, (L) Toe, and (R) Knee, yet the doctor did absolutely nothing to relieve my crinic pain and left me to suffer daily with this disability. I need adequate, effective, and meaningful treatment A.S.A.P. Thank you for your time.

Signature: Daniel J. Lang
 Note: Property/Funds appeals must be accompanied by a Completed Board of Control form BC-1E, Inmate Claim

RECEIVED

Date Submitted: 11-6-07

CDC Appeal Number:

FEB - 1 2008

INMATE APPEALS
BRANCH

07-2778

CDC 602 (12/87)

APR 26 2008

Date:

☐ Other☒ Denied☐ P. Granted☐ Granted☒ See Attached Letter

or the Director's Review, submit all documents to: Director of Corrections
 P.O. Box 942883
 Sacramento, CA 94283-0001
 Attn: Chief, Inmate Appeals

Signature:

continuous delays of treatment occur.

Date Submitted: 1-28-08

I am dissatisfied because the Doctor merely perscribed a temporary solution for the pain by merely perscribing prednisone for seven days and giving me motrin, and Methocarbamol which does nothing for the pain! Although the prednisone in combination with the Ibuprofen 800 mg work together for long term relief, if I keep taking them, but once the prednisone stops, my pain problems return in my shoulders, knee, toes, and kidney lumps that nothing has been done for! Also an X-Ray was ordered for my knee and (L) foot but no X-ray for (L) foot was taken.

response.

H. If dissatisfied, add data or reasons for requesting a Director's Level Review, and submit by mail to the third level within 15 days of receipt of

Warden/Supintendent Signature:

Date Returned to Inmate: JAN 23 2008

Date Completed: 1/23/08

☒ See Attached Letter

G. REVIEWER'S ACTION (Complete within 10 working days): Date assigned:

Due Date: JAN 23 2008

☐ Other☐ Denied☐ P. Granted☒ Granted

Second Level

Signature:

Date Submitted: 12-20-07

I am dissatisfied because I was scheduled for follow up appointment on 12-4-07 and it was not done, nothing was done to relieve pain and meds are not working. I need something like prednisone to keep swelling down/reduce pain.

receipt of response

F. If dissatisfied, explain reasons for requesting a Second-Level Review, and submit to Institution or Parole Region Appeals Coordinator within 15 days of

Signature:

Date to Inmate: DEC 11 2007

Returned

Date Completed: 12/11/07

Title: Warden

Title: Asst. Warden

Interviewed by: You were seen 11/1/07 by the Facility Provider, given Tylenol, 325 mg and SALSAKATE 500 mg. For pain, referred to physical therapy and ORTO for your knee and shoulder pain, with a follow up appointment in 30 days. You made no mention of the pain, you need to complete a heart care services request form, per progress notes.

E. REVIEWER'S ACTION (Complete within 15 working days): Date assigned:

Due Date: DEC 24 2007

☐ Other☐ Denied☐ P. Granted☒ Granted

First Level

State of California

Department of Corrections

Memorandum

Date: January 22, 2008

To: LANG, C-82516
Richard J. Donovan Correctional Facility at Rock Mountain

Subject: SECOND LEVEL APPEAL RESPONSE
LOG NO.: RJD-1-07-02778

ISSUE: You state that you have not been given any meaningful, effective or adequate treatment or pain management for your degenerate arthritis and you have been suffering debilitating pain due to the lack of treatment and pain medication.


You are requesting to be provided immediate pain management for your degenerative arthritis, shoulder, left hip, left toe and right knee pain.

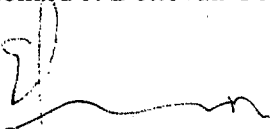
INTERVIEWED BY: Dr. M. Martinez, Physician and Surgeon, on January 9, 2008.

DISCUSSION OF FINDINGS: You were seen and examined on November 1, 2007 by the Primary Care Provider (PCP), prescribed Tylenol and Salsalate for your pain, referred to Physical Therapy and Ortho for your knee and shoulder pain, with a follow up appointment in 30 days. Per your Unit Health Record and Specialty Clinic, your Physical Therapy started December 17, 2007 and you are currently being seen weekly. You were seen, examined and interviewed on January 9, 2008 by the PCP, prescribed Prednisone and Robaxin for your pain, labs were ordered, with a follow up appointment in one month.

DECISION: Your request is granted as you have received pain management and pain medication.

The appellant is advised that this issue may be submitted for a Director's Level of Review if desired.


I. CHOO
Chief Physician and Surgeon
Richard J. Donovan Correctional Facility


E. ROMERO, M.D.
Chief Medical Officer (A)
Richard J. Donovan Correctional Facility

INMATE APPEAL ROUTE SLIP

To: MED

Date: November 7, 2007

From: INMATE APPEALS OFFICE

Re: Appeal Log Number RJD-1-07-02778 By Inmate LANG, C82516

Please assign this appeal to appropriate staff for FIRST level response.

Appeal Issue: MEDICAL

Due Date: 12/24/2007

Special Needs:

STAFF INSTRUCTIONS: Per Director's Rule 3084.5(f) (2) first level appeal review requires a personal interview with the inmate unless the appeal is granted. This policy is not within the institution's jurisdiction and cannot be waived. Director's Rule 3084.5(f) (3) provides that a telephonic interview may be conducted if the inmate is not available in person.

Begin response with GRANTED, DENIED, PARTIALLY GRANTED or WITHDRAWN. When complete, return appeal to the Appeals Office. All first level appeals require signature of the Division Head. Appeals that are incomplete will be returned for appropriate completion.

Refer to D.O.M. 54100 for instructions.

Inmate Appeals Coordinator
Richard J. Donovan Correctional Facility

INMATE APPEAL ROUTE SLIP

To: MED

Date: December 21, 2007

From: INMATE APPEALS OFFICE

Re: Appeal Log Number RJD-1-07-02778 By Inmate LANG, C82516

Please assign this appeal to appropriate staff for SECOND level response.

Appeal Issue: MEDICAL

Due Date: 01/23/2008

Special Needs:

STAFF INSTRUCTIONS:

Second level appeals require a personal interview if not afforded at the first level. Begin your response with: GRANTED, DENIED, PARTIALLY GRANTED or WITHDRAWN. When complete, return to Appeals Office. Appeals that are incomplete will be returned to the responding staff for appropriate completion. Refer to D.O.M. 54100 for instructions.

Inmate Appeals Coordinator
Richard J. Donovan Correctional Facility

EXHIBIT COVER PAGE

10

EXHIBIT

DESCRIPTION OF THIS EXHIBIT:

NUMBER OF PAGES TO THIS EXHIBIT: _____ PAGES.

JURISDICTION: (Check only one)

- ☐ CDCR Administrative Appeal
- ☐ California Victim Compensation
And Government Claims Board
- ☐ Municipal Court
- ☐ Superior Court
- ☐ Appellate Court
- ☐ State Supreme
- ☐ United States District Court
- ☐ United States Circuit Court
- ☐ United States Supreme Court

RE: LANG, Daniel
Date of Examination: March 17, 2008
CDCR No: C82516

Mr. Lang has severe bilateral shoulder DJD. The right side is more symptomatic than the left. He will need total shoulder arthroplasties bilaterally, probably the right side followed by the left side at a later date. He is an appropriate candidate for referral to UCSD for these procedures and I am, therefore, recommending that.

David G. Smith, M.D.
Diplomate, American Board of Orthopaedic Surgery
Fellow, American Academy of Orthopaedic Surgeons
Qualified Medical Examiner, State of California

DGS:seg

cc: Eileen Tyler, UM Nurse

Ext. 10

RE: LANG, Daniel
Date of Examination: April 3, 2008
CDCR No: C82516

Mr. Lang was referred for his right knee. He's had persistent symptoms in his knee. I did a right knee arthroscopy on him back in 2006. He did well for about a year but then he had recurrence of his symptomatology. He has medial joint line tenderness. He may have a recurrent meniscal tear and therefore, I am recommending he have an MRI scan of the right knee. I will see him back following the MRI scan. He is also still pending UCSD consultation for right shoulder arthroplasty.

*Ordered 4/9/08
7243*

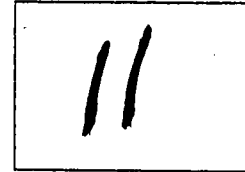
AK

David G. Smith, M.D.
Diplomate, American Board of Orthopaedic Surgery
Fellow, American Academy of Orthopaedic Surgeons
Qualified Medical Examiner, State of California

DGS:seg

cc: Eileen Tyler, UM Nurse

EXHIBIT COVER PAGE



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- ☐ United States Circuit Court
- ☐ United States Supreme Court

**INMATE/PAROLEE
APPEAL FORM**
CDC 602 (12/87)

Location: Institution/Parole Region

Log No.

Category

1. _____

1. _____

2. _____

2. _____

You may appeal any policy, action or decision which has a significant adverse affect upon you. With the exception of Serious CDC 115s, classification committee actions, and classification and staff representative decisions, you must first informally seek relief through discussion with the appropriate staff member, who will sign your form and state what action was taken. If you are not then satisfied, you may send your appeal with all the supporting documents and not more than one additional page of comments to the Appeals Coordinator within 15 days of the action taken. No reprisals will be taken for using the appeals procedure responsibly.

NAME	NUMBER	ASSIGNMENT	UNIT/ROOM NUMBER
Lang, D. J.	C82516	NONE	F.1-1-241

A. Describe Problem: On 4-16-08, I reported to the Facility one Clinic for examination and to request cortizone shot and/or pain medication to releive the pain in my shoulders and right knee. I requested these reasonable services and accomodations but was denied and/or delayed meaningful, effective pain relief and treatment for cronic pain by Doctor Canlas. He basically lied to me by stating that only Doctor Smith can provide that treatment; He has done this with wanton deliberate indiffenence to my serious medical needs subjecting me to cruel and unusual punishmnet as prohibited by U.S. Const.Amend. 8 & 14.

If you need more space, attach one additional sheet.

B. Action Requested: Provide immediate second opinion and effective pain relief, and this is a request for Staff Complaint on Doctor Canlas for his unethical lying and wanton deliberate indiffenence to serious medical needs/care request

Inmate/Parolee Signature: _____

Date Submitted: 4-16-08

C. INFORMAL LEVEL (Date Received: _____)

Staff Response: _____

Staff Signature: _____

Date Returned to Inmate: _____

D. FORMAL LEVEL

If you are dissatisfied, explain below, attach supporting documents (Completed CDC 115, Investigator's Report, Classification chrono, CDC 128, etc.) and submit to the Institution/Parole Region Appeals Coordinator for processing within 15 days of receipt of response.

Signature: _____

Date Submitted: _____

Note: Property/Funds appeals must be accompanied by a completed Board of Control form BC-1E, Inmate Claim

CDC Appeal Number: _____

EX 14



CDC 602 (12/87)

☐ See Attached Letter

DIRECTOR'S ACTION: ☐ Granted

☐ P. Granted

☐ Denied

☐ Other

Date: _____

Attn: Chief, Inmate Appeals
Sacramento, CA 94283-0001
P.O. Box 942883

For the Director's Review, submit all documents to: Director of Corrections

Signature: _____

Date Submitted: _____

H. If dissatisfied, add data or reasons for requesting a Director's Level Review, and submit by mail to the third level within 15 days of receipt of response.

Warden/Superintendent Signature: _____

Date Returned to Inmate: _____

Signature: _____

Date Completed: _____

☐ See Attached Letter

G. REVIEWER'S ACTION (Complete within 10 working days): Date assigned: _____

Due Date: _____

Second Level: ☐ Granted

☐ P. Granted

☐ Denied

☐ Other

Signature: _____

Date Submitted: _____

F. If dissatisfied, explain reasons for requesting a Second-Level Review, and submit to Institution or Parole Region Appeals Coordinator within 15 days of receipt of response.

Signature: _____

Title: _____

Date to Inmate: _____

Division Head Approved: _____

Title: _____

Date Completed: _____

Returned

Interviewed by: _____

E. REVIEWER'S ACTION (Complete within 15 working days): Date assigned: _____

Due Date: _____

First Level: ☐ Granted

☐ P. Granted

☐ Denied

☐ Other

STATE OF CALIFORNIA

DEPARTMENT OF CORRECTIONS

**REASONABLE MODIFICATION OR
ACCOMMODATION REQUEST**

CDC 1824 (1/95)

INSTITUTION/PAROLE REGION:

LOG NUMBER:

CATEGORY:

18. ADA

NOTE: THIS FORM IS TO BE USED ONLY BY INMATES/PAROLEES WITH DISABILITIES*In processing this request, it will be verified that the inmate/parolee has a disability which is covered under the Americans With Disabilities Act.*

INMATE/PAROLEE'S NAME (PRINT)

Lang, D. J.

CDC NUMBER

C82516

ASSIGNMENT

none

HOURS/WATCH

none

HOUSING

F.1-1-241

In accordance with the provisions of the Americans With Disabilities Act (ADA), no qualified individuals with a disability shall, on the basis of disability, be excluded from participation in, or be denied the benefits of the services, activities, or programs of a public entity, or be subjected to discrimination.

You may use this form to request specific reasonable modification or accommodation which, if granted, would enable you to participate in a service, activity or program offered by the Department/Institution/facility, for which you are otherwise qualified/eligible to participate.

Submit this completed form to the institution or facility's Appeals Coordinator's Office. A decision will be rendered within 15 working days of receipt at the Appeals Coordinator's Office and the completed form will be returned to you.

If you do not agree with the decision on this form, you may pursue further review. The decision rendered on this form constitutes a decision at the FIRST LEVEL of review.

To proceed to SECOND LEVEL, attach this form to an Inmate/Parolee Appeal Form (CDC 602) and complete section "F" of the appeal form.

Submit the appeal with attachment to the Appeals Coordinator's Office within 15 days of your receipt of the decision rendered on this request form.

If you are not satisfied with the SECOND LEVEL review decision, you may request THIRD LEVEL review as instructed on the CDC 602.

MODIFICATION OR ACCOMMODATION REQUESTED**DESCRIPTION OF DISABILITY:**

Severe Degenerative Arthritis and cronic pain in right knee and shoulders.

WHAT VERIFICATION DO YOU HAVE OF YOUR DISABILITY?

SEE MEDICAL FILE IN YOUR POSSESSION.

DESCRIBE THE PROBLEM:

Attached CDCR 602 Appeal incorporated herein in its entirety...

WHAT SPECIFIC MODIFICATION OR ACCOMMODATION IS REQUESTED?

Documentation of Mobility imparement, and effective treatment and that requested in attached CDCR 602 Appeal incorporated herein in its entirety.

DANIEL J. LANG

INMATE/PAROLEE'S SIGNATURE

4-16-08

DATE SIGNED

REASONABLE MODIFICATION OR ACCOMMODATION REQUEST
CDC 1824 (1/95)

REVIEWER'S ACTION

DATE ASSIGNED TO REVIEWER:

DATE DUE:

TYPE OF ADA ISSUE

- ☐ PROGRAM, SERVICE, OR ACTIVITY ACCESS (Not requiring structural modification)
- ☐ Auxiliary Aid or Device Requested
- ☐ Other _____
- ☐ PHYSICAL ACCESS (requiring structural modification)

DISCUSSION OF FINDINGS:

DATE INMATE/PAROLEE WAS INTERVIEWED

PERSON WHO CONDUCTED INTERVIEW

DISPOSITION

☐ GRANTED ☐ DENIED ☐ PARTIALLY GRANTED

BASIS OF DECISION:

NOTE: If disposition is based upon information provided by other staff or other resources, specify the resource and the information provided. If the request is granted, specify the process by which the modification or accommodation will be provided, with time frames if appropriate.

DISPOSITION RENDERED BY: (NAME)

TITLE

INSTITUTION/FACILITY

APPROVAL

ASSOCIATE WARDEN'S SIGNATURE

DATE SIGNED

DATE RETURNED TO INMATE/PAROLEE

STATE OF CALIFORNIA

DEPARTMENT OF CORRECTIONS

CDC 1858 (2/97)


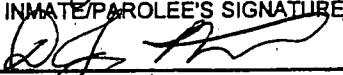
RIGHTS AND RESPONSIBILITY STATEMENT

The California Department of Corrections has added departmental language (shown inside brackets, in non-boldface type) for clarification purposes.

Pursuant to Penal Code 148.6, anyone wishing to file an allegation of misconduct by a departmental peace officer must read, sign and submit the following statement:

YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A POLICE OFFICER [this includes a departmental peace officer] FOR ANY IMPROPER POLICE [or peace] OFFICER CONDUCT. CALIFORNIA LAW REQUIRES THIS AGENCY TO HAVE A PROCEDURE TO INVESTIGATE CITIZENS' [or inmates'/parolees'] COMPLAINTS. YOU HAVE A RIGHT TO A WRITTEN DESCRIPTION OF THIS PROCEDURE. THIS AGENCY MAY FIND AFTER INVESTIGATION THAT THERE IS NOT ENOUGH EVIDENCE TO WARRANT ACTION ON YOUR COMPLAINT; EVEN IF THAT IS THE CASE, YOU HAVE THE RIGHT TO MAKE THE COMPLAINT AND HAVE IT INVESTIGATED IF YOU BELIEVE AN OFFICER BEHAVED IMPROPERLY. CITIZEN [or inmate/parolee] COMPLAINTS AND ANY REPORTS OR FINDINGS RELATING TO COMPLAINTS MUST BE RETAINED BY THIS AGENCY FOR AT LEAST FIVE YEARS.

IT IS AGAINST THE LAW TO MAKE A COMPLAINT THAT YOU KNOW TO BE FALSE. IF YOU MAKE A COMPLAINT AGAINST AN OFFICER KNOWING IT IS FALSE, YOU CAN BE PROSECUTED ON A MISDEMEANOR CHARGE. [An inmate/parolee who makes a complaint against a departmental peace officer, knowing it is false, may be issued a serious disciplinary rule violation, in addition to being prosecuted on a misdemeanor charge.]

COMPLAINANT'S PRINTED NAME LANG, Daniel J.	COMPLAINANT'S SIGNATURE 	DATE SIGNED 4-17-08	
INMATE/PAROLEE PRINTED NAME LANG, Daniel J.	INMATE/PAROLEE'S SIGNATURE 	CDC NUMBER C82516	DATE SIGNED 4-17-08
RECEIVING STAFF'S PRINTED NAME	RECEIVING STAFF'S SIGNATURE	DATE SIGNED	

DISTRIBUTION:

ORIGINAL -

Public - Institution Head/Parole Administrator

Inmate/Parolee - Attach to CDC form 602

Employee - Institution Head/Parole Administrator

COPY - Complainant

EXHIBIT COVER PAGE

12

EXHIBIT

DESCRIPTION OF THIS EXHIBIT:

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- ☐ California Victim Compensation
And Government Claims Board
- ☐ Municipal Court
- ☐ Superior Court
- ☐ Appellate Court
- ☐ State Supreme
- ☐ United States District Court
- ☐ United States Circuit Court
- ☐ United States Supreme Court

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)
INMATE PRIORITY PASS Richard J Donovan Correctional

Info:

INMATE'S NAME: LANG, DANIEL	CDC#: C82516	PASS FROM:
ISSUED BY: DR Line	DATE: 12/14/2006	APPROVED BY: CR
PASS TO: Facility 1 Clinic	DATE: 12/15/2006	TIME: 11:45
REASON: Dr. Line	HOUSING: F10100000000111	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)
INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info:

INMATE'S NAME: LANG, DANIEL	CDC#: C82516	PASS FROM:
ISSUED BY: DR Line	DATE: 1/24/2007	APPROVED BY: CR
PASS TO: Facility 1 Clinic	DATE: 1/25/2007	TIME: 10:45
REASON: Dr. Line	HOUSING: F10100000000111	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)
INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info:

INMATE'S NAME: LANG, DANIEL	CDC#: C82516	PASS FROM:
ISSUED BY: DR Line	DATE: 2/21/2007	APPROVED BY: CR
PASS TO: Facility 1 Clinic	DATE: 2/22/2007	TIME: 10:00
REASON: Nurse Line	HOUSING: F10100000000111	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)
INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info:

INMATE'S NAME: LANG, DANIEL	CDC#: C82516	PASS FROM:
ISSUED BY: DR Line	DATE: 3/21/2007	APPROVED BY: CR
PASS TO: Facility 1 Clinic	DATE: 3/22/2007	TIME: 10:00
REASON: Dr. Line	HOUSING: F10100000000111	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)
INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info:

INMATE'S NAME: LANG, DANIEL	CDC#: C82516	PASS FROM:
ISSUED BY: BP LINE	DATE: 4/9/2007	APPROVED BY: CR
PASS TO: Facility 1 Clinic	DATE: 4/10/2007	TIME: 8:00
REASON: Nurse Line	HOUSING: F10100000000111	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129 (7/88)
INMATE PASS R.J. Donovan Corr. F Priority: **Yes**

Job Info:

INMATE'S NAME: LANG, DANIEL	CDC#: C82516	HOUSING: F101-111L
ISSUED BY: Dr. Livesay	DATE: 10/25/2007	PASS FROM:
PASS TO: F1 MHSBS BLDG (G)	DATE: 10/26/2007	TIME: 11:00
REASON: CM Contact EOP		
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)
INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info:

INMATE'S NAME: LANG, DANIEL	CDC#: C82516	PASS FROM:
ISSUED BY: RN Line	DATE: 11/18/2007	APPROVED BY: CR
PASS TO: Facility 1 Clinic	DATE: 11/19/2007	TIME: 9:45
REASON: Nurse Line	HOUSING: F10100000000111	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)
INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info:

INMATE'S NAME: LANG, DANIEL	CDC#: C82516	PASS FROM:
ISSUED BY: RN Line	DATE: 11/18/2007	APPROVED BY: CR
PASS TO: Facility 1 Clinic	DATE: 11/19/2007	TIME: 10:30
REASON: Nurse Line	HOUSING: F10100000000111	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

NMATE PRIORITY PASS Richard J Donovan Correctional

Job Info:

INMATE'S NAME:	CDC#:	PASS FROM:
ANG, DANIEL	C82516	
ISSUED BY:	DATE:	APPROVED BY:
DR Line	12/3/2007	BP
PASS TO:	DATE:	TIME:
Facility 1 Clinic	12/4/2007	11:30
REASON: Dr. Line	HOUSING: F1010000000011	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)

INMATE PRIORITY PASS Richard J Donovan Correctional

Info:

INMATE'S NAME:	CDC#:	PASS FROM:
ANG, DANIEL	C82516	
ISSUED BY:	DATE:	APPROVED BY:
DR Line	2/22/2008	
PASS TO:	DATE:	TIME:
Facility 1 Clinic	2/25/2008	10:15
REASON: Nurse Line	HOUSING: F1010000000011	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)

INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info:

INMATE'S NAME:	CDC#:	PASS FROM:
LANG, DANIEL	C82516	
ISSUED BY:	DATE:	APPROVED BY:
DR Line	5/5/2008	
PASS TO:	DATE:	TIME:
Facility 1 Clinic	5/6/2008	8:00
REASON: Nurse Line	HOUSING: F1010000000024	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)

INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info: H/U#3 PORTER (3/W)

INMATE'S NAME:	CDC#:	PASS FROM:
ANG, DANIEL	C82516	
ISSUED BY:	DATE:	APPROVED BY:
DR Line	5/11/2006	
PASS TO:	DATE:	TIME:
Facility 1 Clinic	5/12/2006	9:30
REASON: Nurse Line	HOUSING: F10300000000111	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)

INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info:

INMATE'S NAME:	CDC#:	PASS FROM:
LANG, DANIEL	C82516	
ISSUED BY:	DATE:	APPROVED BY:
DR Line	2/7/2008	
PASS TO:	DATE:	TIME:
Facility 1 Clinic	2/8/2008	8:00
REASON: Dr. Line	HOUSING: F1010000000011	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)

INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info:

INMATE'S NAME:	CDC#:	PASS FROM:
LANG, DANIEL	C82516	
ISSUED BY:	DATE:	APPROVED BY:
DR Line	5/8/2008	
PASS TO:	DATE:	TIME:
Facility 1 Clinic	5/9/2008	11:15
REASON: Dr. Line	HOUSING: F10100000000241	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)

INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info:

INMATE'S NAME:	CDC#:	PASS FROM:
LANG, DANIEL	C82516	
ISSUED BY:	DATE:	APPROVED BY:
DR Line	6/20/2008	
PASS TO:	DATE:	TIME:
Facility 1 Clinic	6/23/2008	9:45
REASON: Dr. Line	HOUSING: F10100000000241	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA DEPT. OF CORRECTIONS CDC 129-a(07/88)

INMATE PRIORITY PASS Richard J Donovan Correctional

Job Info: H/U#3 PORTER (3/W)

INMATE'S NAME:	CDC#:	PASS FROM:
LANG, DANIEL	C82516	
ISSUED BY:	DATE:	APPROVED BY:
DR Line	5/17/2006	
PASS TO:	DATE:	TIME:
Facility 1 Clinic	5/18/2006	12:15
REASON: Dr. Line	HOUSING: F10300000000111	
ARRIVAL TIME:	RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info:			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
RN Line	8/31/2006	CL	
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	9/1/2006	9:00	
REASON: Nurse Line	HOUSING: F10100000000111		
ARRIVAL TIME:	RECORDED BY:		
DEPART TO:	TIME:	RECORDED BY:	

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129 (7/83)	
INMATE PASS			
INMATE'S NAME:	CDC#:	HOUSING#:	
LANG, DANIEL	C82516	1-111	
ISSUED BY:	DATE:	PASS FROM:	
FW	8/14/06	H/UA	
PASS TO:	DATE:	TIME:	
FAC I Clinic	8/14/06	1000	
REASON: SUTURAL Removal			
ARRIVAL TIME:		RECORDED BY:	
DEPART TO:	TIME:	RECORDED BY:	

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info: H/U#3 PORTER (3/W)			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
P LINE	4/17/2006	CL	
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	4/17/2006	8:00	
REASON: Nurse Line	HOUSING: F10300000000111		
ARRIVAL TIME:	RECORDED BY:		
DEPART TO:	TIME:	RECORDED BY:	

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info:			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
BP LINE	7/8/2006	CL	
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	7/5/2006	8:00	
REASON: Nurse Line	HOUSING: F10100000000111		
ARRIVAL TIME:	RECORDED BY:		
DEPART TO:	TIME:	RECORDED BY:	

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info: H/U#3 PORTER (3/W)			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
BP LINE	6/17/2006	CL	
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	6/17/2006	8:00	
REASON: Nurse Line	HOUSING: F10300000000111		
ARRIVAL TIME:	RECORDED BY:		
DEPART TO:	TIME:	RECORDED BY:	

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info:			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
BP LINE	8/3/2006	CL	
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	8/4/2006	8:00	
REASON: Nurse Line	HOUSING: F10100000000111		
ARRIVAL TIME:	RECORDED BY:		
DEPART TO:	TIME:	RECORDED BY:	

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info:			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
DR Line	7/17/2006	CL	
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	7/17/2006	10:15	
REASON: Dr. Line	HOUSING: F10100000000111		
ARRIVAL TIME:	RECORDED BY:		

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info: H/U#3 PORTER (3/W)			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
BP LINE	5/2/2006	CL	
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	5/3/2006	8:00	
REASON: Nurse Line	HOUSING: F10300000000111		
ARRIVAL TIME:	RECORDED BY:		

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info: H/U#3 PORTER (3/W)			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
DR Line	3/23/2006		
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	3/24/2006	9:45	
REASON: Dr. Line	HOUSING: F10300000000111		
ARRIVAL TIME:	RECORDED BY:		
DEPART TO:	TIME:	RECORDED BY:	

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info: H/U#3 PORTER (3/W)			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
DR Line	4/4/2006		
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	4/5/2006	15:00	
REASON: Dr. Line	HOUSING: F10300000000111		
ARRIVAL TIME:	RECORDED BY:		
DEPART TO:	TIME:	RECORDED BY:	

At approximately 1400 hrs.
I saw Doctor Smith again
who recommended that the
Doctor At Alvarado Hospital
do the shoulder surgery and
he said he will call me back
for three MRI consult.

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info:			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
DR Line	8/25/2008	LL	
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	8/26/2008	11:15	
REASON: Dr. Line	HOUSING: F10100000000241		
ARRIVAL TIME:	RECORDED BY:		
DEPART TO:	TIME:	RECORDED BY:	

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info:			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
DR Line	7/15/2008	LL	
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	7/16/2008	11:30	
REASON: Dr. Line	HOUSING: F10100000000241		
ARRIVAL TIME:	RECORDED BY:		
DEPART TO:	TIME:	RECORDED BY:	

STATE OF CALIFORNIA		DEPT. OF CORRECTIONS CDC 129-a(07/88)	
INMATE PRIORITY PASS		Richard J Donovan Correctional	
Job Info:			
INMATE'S NAME:	CDC#:	PASS FROM:	
LANG, DANIEL	C82516		
ISSUED BY:	DATE:	APPROVED BY:	
LVN Line	4/29/2008	LL	
PASS TO:	DATE:	TIME:	
Facility 1 Clinic	4/30/2008	8:15	
REASON: Nurse Line	HOUSING: F10100000000241		
ARRIVAL TIME:	RECORDED BY:		

On 7-13-08 I was
in line, saw doc, so I
when increased my
neurotic to 80mg. 3x daily
I told him of pain
I am in due to guard
jumping on back of
no thing - complaint
of storm

EXHIBIT COVER PAGE

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EXHIBIT

DESCRIPTION OF THIS EXHIBIT:

NUMBER OF PAGES TO THIS EXHIBIT: _____ PAGES.

JURISDICTION: (Check only one)

- ☐ CDCR Administrative Appeal
- ☐ California Victim Compensation
And Government Claims Board
- ☐ Municipal Court
- ☐ Superior Court
- ☐ Appellate Court
- ☐ State Supreme
- ☐ United States District Court
- ☐ United States Circuit Court
- ☐ United States Supreme Court

NAME and NUMBER LANG, DANIEL C-82516 F1-03-111L

he above named patient requires: **ONLY WAIST CHAIN CUFFING [X]**
DUE TO MEDICAL CONDITION

☒ This chrono is **PERMANENT** for the duration of his stay at RJDCF.
☐ This chrono is **TEMPORARY** and will expire at midnight of:

rig: C-File
cc: Unit Health Record
Housing Officer
Inmate

J. KAHNG, M.D.
Staff Physician/Surgeon

03/06/06

RJDCF (bl)

MEDICAL-PSYCHIATRIC-DENTAL

DATE

INMATE: LANG, DANIEL

CDC # C82516

HOUSING: FA-B1-130L

This inmate has a PERMANENT medical condition which requires LOWER BUNK HOUSING. He has ability to climb stairs and does not require lower tier housing.

CC Medical Records
C-File
Inmate Assignment
CC/CCII
Housing Officer
Inmate

Signature: D. Deering, M.D.

Arrival Date: 3/4/2003

Date: 05/21/03

HEALTH SERVICES CHRONO

CDC-128-C

INMATE: LANG, DANIEL

CDC # C82516

HOUSING: FA-B1-155U

THIS INMATE HAS A CURRENT TB CODE OF **32**

Signature

CC: (ORIGINAL) CENTRAL FIL
HEALTH RECORD
INMATE

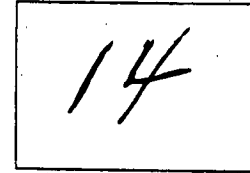
Arrival Date: 3/4/2003

Date: 5/16/03

T B C H R O N O

CDC-128-C

EXHIBIT COVER PAGE



EXHIBIT

DESCRIPTION OF THIS EXHIBIT:

NUMBER OF PAGES TO THIS EXHIBIT: _____ PAGES.

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- ☐ CDCR Administrative Appeal
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And Government Claims Board
- ☐ Municipal Court
- ☐ Superior Court
- ☐ Appellate Court
- ☐ State Supreme
- ☐ United States District Court
- ☐ United States Circuit Court
- ☐ United States Supreme Court

DANIEL J. LANG, C82516
RICHARD J. DONOVAN CORR. FAC. 1-1-111
P.O. BOX 799001
SAN DIEGO, CA 92179-9001

11-23-07

ROBERT SILLEN, RECEIVER
1731 TECHNOLOGY DRIVE, SUITE 700
SAN JOSE, CA 95110

In re: NOTICE OF LITIGATION ACTION BEING TAKEN FOR CDCR/RJD STAFF FAILURE TO
PROVIDE ADEQUATE, EFFECTIVE, AND MEANINGFUL MEDICAL TREATMENT, CRONIC
PAIN MANAGEMENT AND FOLLOW-UP APPOINTMNET, ETC....

Attention: Mr. Robert Sillen, Receiver, Calif. Prison Health Care Receivership Corp.,

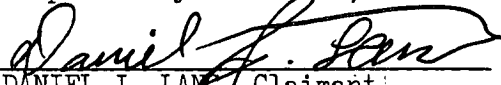
I am sending you a copy of the Government Claim Form that I have filed due to
the fact that R.J.D. Correctional Facility Staff have continuously delayed and/or
denied me Cronic pain treatmnet and/or reasonable accomodations and other
treatment/diagnosis for my serious medical needs complaints.

Attached you will find the Govenrment Claim Form (One Copy) I filed on or about
November 15, 2007 with the State Board of Control Governmmnet Claims Branch; As
I have not been able to receive the needed treatment that I have diligently
and repleatedly requested at R.J.D. Corr. Fac., I will also be litigating the
issue further.

I appeal to you for assistance in receiving effective medical care, in the
interim, as I have not been provided with any effective and meaningful treatment
by staff at this facility, and treatment is delayed for weeks and even months
to date. I repeatedly submit Medical Request Forms to no avail. They send me
to a nurse whom refuses to allow me to see a doctor or schedules an appointment
weeks in the future allowing me to remain in SEVERE CRONIC PAIN with no relief;
If you believe that is just than disregard this request for asisstance.

I thank you for your time and consideration in thismost important matter.

Respectfully submitted,


DANIEL J. LANG, Claimant

CC: Director of Corrections, Teresa Schwartz
R.J.D. Corr. Fac. Warden, Robert J. Hernandez

PROOF OF SERVICE BY MAIL

STATE OF CALIFORNIA)
) SS
COUNTY OF SAN DIEGO)

[C.C.P. §§ 446, 2015.5; 28 U.S.C. §1746]

I, Robert Hendrickson, am a resident of the State of California and am over the age of eighteen years and am not a party to the above-entitled action. My address is listed below.

On 11-27-07, I served the following documents:

Letter to Robert Sillen, Receiver, Calif. Prison Health Care Receivership Corp. with one copy of Government Claim Form attached;

by placing a true copy thereof enclosed in a sealed envelope with First Class postage thereon fully prepaid in the United States Mail by delivering to prison officials for processing through the Institution's internal legal mail system at San Diego California, addressed as follows::

ROBERT SILLEN, RECEIVER
1731 TECHNOLOGY DRIVE, SUITE 700
SAN JOSE, CA 95110
(ORIGINAL)

TERESA SCHWARTZ, DIRECTOR
DEPARTMENT OF CORRECTIONS & REHABILITATION
1515 "S" STREET
SACRAMENTO, CA 95814
(1-COPY)

ROBERT J. HERNANDEZ, WARDEN
RICHARD J. DONOVAN CORR. FAC.
480 ALTA ROAD
SAN DIEGO, CA 92179
(1-COPY)

I declare under penalty of perjury under the laws of the State of California and the United States of America that the foregoing is true and correct. Executed in the County of San Diego, California on 11-27-07

ROBERT HENDRICKSON, F19729

Robert Hendrickson

RICHARD J. DONOVAN CORRECTIONAL FACILITY 1-1-111 UP

P.O. Box 799001

San Diego, CA 92179-9001

Pursuant to the holding of the United States Supreme Court in Houston v. Lack 108 S. Ct. 2379, 487 U.S. 266, 101 L.Ed.2d 245 (1988) and FRAP, Rule 4 (c) inmate legal documents are deemed filed on the date they are delivered to prison staff for processing and mailing via the Institution's internal legal mail procedures.

EXHIBIT COVER PAGE

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EXHIBIT

DESCRIPTION OF THIS EXHIBIT:

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- ☐ California Victim Compensation
And Government Claims Board
- ☐ Municipal Court
- ☐ Superior Court
- ☐ Appellate Court
- ☐ State Supreme
- ☐ United States District Court
- ☐ United States Circuit Court
- ☐ United States Supreme Court

M E M O R A N D U M

DATE: June 21, 2006

TO: R.J. Donovan Appeals Coordinator

FROM: Daniel J. Lang, C82516, F1-B3-111 Low

SUBJECT: Unanswered CDC 1824, Submitted on 5-17-06

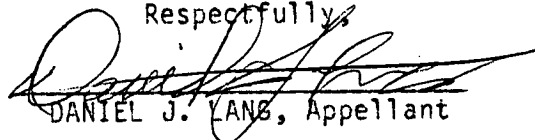
ATTENTION: J. Stovall, Appeals Coordinator

On 5-17-06, I sent an 1824 appeal to your office regarding medical issues. Those issues have not been resolved, and I have not heard anything regarding that appeal. I have been patiently waiting for some kind of response, for approximately 33 days now. I have heard nothing. Attached you will find a copy of that CDC 1824 I sent to your office on 5-17-06. Please locate the original which is missing, suppressed, or unanswered, and have it forwarded to me with an appropriate response, or please stamp the attached copy as "TREAT AS ORIGINAL" and assist me in receiving due process of law in these matters.

Additionally I sent a CDC 602 Appeal, with supporting documentation, to your office on 6-19-06, after receiving my 1824 discriminatory issues, denial of reasonable accommodations for E.O.P. indeterminately sentenced prisoner to be paroled, "SCREENED OUT." I believe that was inappropriate, yet I expect that the CDC 602 Appeal, with supporting documentation, will be handled in a manner that will afford me due process of law with regard to the issues therein. I have a copy of this appeal also if it was to somehow turn up missing. Please inform me if you need the copy?

I request assistance in resolving the above issues as soon as possible; I look forward to a resolution of my appeals in an equitable and timely manner. Thank you for your time and consideration in these important matters!

Respectfully,



DANIEL J. LANG, Appellant

CC: Personal Appeal Files
Power of Attorney, Sheri Perry
U.S. Department of Justice, Civil Rights Division